FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	FORM 1 ORGANIZATION											
. •	(See instructions)						Office use only					
NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple: If typying the lines	ı, type	12FE	4M5	1 1				
Bachmann fo	r Congress										ш	
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ADDRESS (number and	d street)	30x 25950				ш			ш		ш	
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		CITY▲					•		ZIP CODE 📥			
COMMITTEE'S E-MA	AIL ADDRESS IeBachmann.org											
Chris@wiche	iebaciiiiaiiii.org			шш								
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COMMITTEE'S WEE	B PAGE ADDRESS (U	RL)										
http://www.N	licheleBachmann.	org/ 	1 1	1 1 1 1	1 1 1 1	1 1 1	1 1	1 1	1 1 1	1 1		
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COMMITTEE'S FAX 703-997-2549  2. DATE  M 0	M / D D / Y											
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3. FEC IDENTIFICATION NUMBER  C C00410118  4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)												
I certify that I have exam  Type or Print Name o	nined this Statement and	to the best of my know	_	d belief it is true	e, correct an	d complete	9					
Signature of Treasure	er Electronically File	d by <b>Christophe</b>	er M. M	arston		Date	<b>0</b> 2 M	/ D	0 4 /	Y Y 2	0 0 9 ·	
NOTE: Submission of f	alse, erroneous, or incon	nplete information may							J.S.C. S4	37g.		
Office Use Only				For further in Federal Election Toll Free 800- Local 202-694	on Commiss 424-9530				C FO		1	

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